

## **US Life Expectancy Decreases with Increased Suicide & Overdose Rates**

You may well have heard the recent reports of increased suicide and overdose rates in our country. These rates are significant enough to contribute to decreased life expectancy in the US. The magnitude of these changes are shocking in a country where we are historically accustomed to improving life expectancy rates.

**Overdose Deaths:** According to the Centers of Disease Control more than 70,000 people died of drug overdoses in 2017 which is 6,600 more than 2016. This is a 10% increase compared to overdoses in 2016. The opioid epidemic is a major component of drug overdoses which has been further complicated by synthetic opioids like Fentanyl. Indiana is one of the 20 states with a higher overdose rate than the national average of 21 per 100,000. If you want to read the CDC's brief on 2017 overdose rates click below:

<https://www.cdc.gov/nchs/products/databriefs/db329.htm>

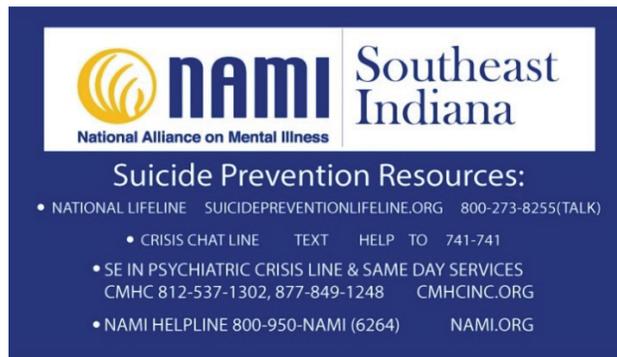
**Suicide Rates:** US suicide rates also increased in 2017. There were 2,000 more suicide deaths in 2017 compared to 2016 with 47,000 reported in 2017. Suicide is the 10<sup>th</sup> leading cause of death in the US. It is the second most common cause of death for people ages 10-34. Since 1999 suicide rates in the US have increased 33%. Rural areas show higher suicide rates. Is that because of loneliness or economic concerns? fewer resources to help? stigma against receiving help? Decreased participation in church and community? Some point to the rise of technology as a contributing factor to isolation. Is there a breakdown in the family unit in the US? There are many issues to consider. The details are discussed in the below link:

<https://www.cdc.gov/nchs/products/databriefs/db330.htm>

**Are Suicides and Overdoses Related?** Many suspect the underlying causes of suicide and overdoses could be associated. Turning to suicide or drugs may be an escape from depression, anxiety and hopelessness. They are both preventable deaths. What can we do to help? How can we communicate the importance of getting help and that help can make a difference? I suggest we start with our own family and friends. I believe we need to take time to talk more to each other, to truly listen more and to communicate hope in our loved one's abilities to improve. These statistics may provide fodder for family discussions. Maybe we can role model that we ourselves seek help at times to make our lives better. We at least have some ability to positively affect our loved ones.

While it is preventable, this is not to lay guilt on family members who have lost a loved one to suicide. Sometimes depressed people aren't open about their feelings due to stigma and shame. They often refuse the suggestion of help. Other times impulsive behavior results in suicide. This leaves family members with no idea of their loved one's desperation. Or possibly families only recognizing hints of

their loved one's unhappiness after the fact. We are all human and certainly we can be preoccupied with our own stress issues. Below are Suicide Prevention resources and warning signs:



The graphic features the NAMI logo (National Alliance on Mental Illness) and the text "Southeast Indiana". Below this, it lists "Suicide Prevention Resources:" followed by three bullet points: "NATIONAL LIFELINE SUICIDEPREVENTIONLIFELINE.ORG 800-273-8255(TALK)", "CRISIS CHAT LINE TEXT HELP TO 741-741", and "SE IN PSYCHIATRIC CRISIS LINE & SAME DAY SERVICES CMHC 812-537-1302, 877-849-1248 CMHCINC.ORG". A fourth bullet point lists "NAMI HELPLINE 800-950-NAMI (6264) NAMI.ORG".



The graphic has a dark blue background with white text. At the top, it says "WARNING SIGNS OF SUICIDE". Below this is a list of ten warning signs: "Suicide threats or plans", "Previous suicide attempts", "Alcohol and drug abuse", "Statements revealing a desire to die", "Sudden behavior changes, recklessness", "Prolonged depression, isolation", "Changes in sleeping or eating", "Recent loss or change", "Making final arrangements", "Giving away prized possessions", and "Purchasing a gun or stockpiling pills". At the bottom, it says "YOUTHSUICIDE WARNINGSIGNS.ORG".

### **What About International Differences?**

**International Suicide Rate Comparison:** According to a 2018 suicide rate ranking, out of 176 countries, the United States ranks 27<sup>th</sup> at 15.3 suicides per 100,000. Note that the CDC just reported a rate of 14 per 100,000. (Curious difference that I can't explain). Is our culture a major contributor? Some of the poorest countries have the lowest suicide rates. Maybe family and/or religious support is stronger in poor countries? The article below attributes most suicides to mental health or physical health problems. Some countries like Belgium permit doctor-assisted suicide which raises their rates above ours.

<http://worldpopulationreview.com/countries/suicide-rate-by-country/>

**International Overdose Death Rate Comparison:** Do other countries have a similar overdose rate as the US? It turns out the US overdose death rate is the highest in the world. While the US has just 4% of the world population, we have 27% of the worlds overdose deaths, according to a UN report. The following link has a detailed discussion:

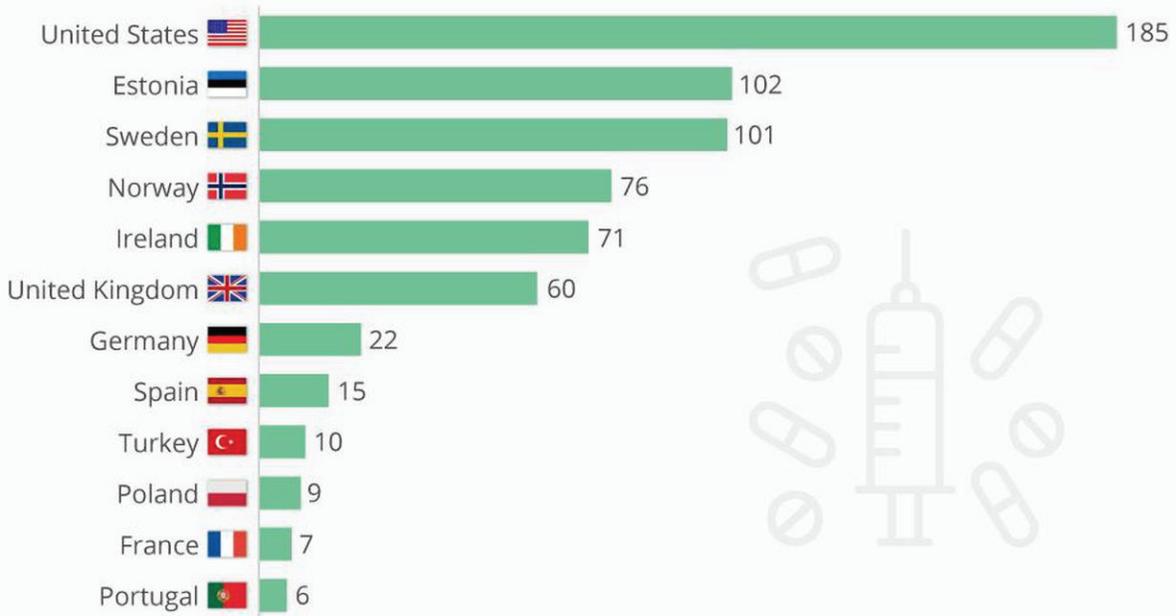
<https://www.vox.com/policy-and-politics/2017/6/28/15881246/drug-overdose-deaths-world>

Below is a New York Times chart comparing the US to 11 European countries. What I find most interesting is that Portugal has such a low overdose death rate. It is fascinating that Portugal has decriminalized drug use and instead directs funds to rehabilitation and helping people get jobs. What a reversal from our approach in the US. Change is slow, but we can work towards more treatment in the US. Below is a discussion of Portugal’s approach:

[https://papers.ssrn.com/sol3/papers.cfm?abstract\\_id=1464837](https://papers.ssrn.com/sol3/papers.cfm?abstract_id=1464837)

## America's Overdose Epidemic In Perspective

Drug-induced deaths per million of the population\*



\* Latest available year – all nations are 2014 except for US (2016) and Germany (2015).

Sources: New York Times via AEI, European Drug Report

Forbes statista

**Locally:** We are fortunate locally to have relatively advanced programs in our Court system with the JCAP program and Judge Cleary’s Drug Court, Veteran’s Court, and Problem-Solving Courts. These programs help save the lives of those with addiction while keeping our communities safer and saving

money in the long run with decreased recidivism rates. The Court programs are an impressive community display of collaboration in conjunction with Community Mental Health Center, CMHC, staff and other community supports.

In addition, CMHC and many organizations offer programs to help those with addictions. Resources for Substance Use Disorders can be found at the bottom of this article at the National Alliance on Mental Illness, NAMI SE IN's website or on Facebook:

**In conclusion:** At this point, we can ponder these issues and with that knowledge try our best to help ourselves, families, friends and community. Certainly, we want to prevent depression, suicide and the risks associated with substance use disorders. Share your love, hope and support. Reach out for help. Yes, it is work to recover from depression and substance use disorders. But with our many community resources, it is possible. People can recover!

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